

0495285-3786 18mm 1129  
ARREST / NOTICE TO APPEAR

OBTS Number	Agency Name <b>Boca Raton Police Department</b>		Agency Report Number (N.T.A.'s only) <b>3, 2   2018-001329</b>	Request for Warrant 1. Arrest 2. N.T.A.	Request for Capias 3. [ ] 4. [ ]	JUVENILE [ ]	[ ]	
Agency ORI Number <b>0500200</b>	Charge Type Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Location of Offense (Business Name, Address) <b>765 JEFFERY ST, BOCA RATON, FL 33487</b>	If Weapon Seized Enter Type <b>None/not Applicable</b>	Multiple Clearance Indicator [ ]			
Location of Arrest (Including Name of Business) <b>765 JEFFERY ST</b>		Date of Arrest <b>01/28/2018</b>	Time of Arrest <b>09:13</b>	Booking Date <b>01/28/18</b>	Booking Time <b>0742</b>	Jail Date <b>01/28/18</b>	Jail Time	Location of Vehicle

Name (Last, First, Middle) <b>FREEMAN, JEFFREY PAUL</b>		Alias: <b>Alias (Name, DOB, Soc. Sec. #, Etc.)</b>	
Race W - White B - Black	I - American Indian Q - Oriental/Asian	Sex <b>M</b>	Date of Birth <b>09/25/1986</b>
Height <b>5'10</b>	Weight <b>163</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>
Complexion <b>MEDIUM</b>	Build <b>Med</b>	Marital Status <b>D</b>	Religion <b>CATHOLIC</b>
Local Address (Street, Apt. Number) (City) (State) (Zip) <b>765 JEFFERY ST 304, BOCA RATON, FL 33487</b>		Phone <b>504-638-5298</b>	Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>1</b>
Permanent Address (Street, Apt. Number) (City) (State) (Zip) <b>765 JEFFERY ST 304, BOCA RATON, FL 33487</b>		Phone	Address Source <b>DEF</b>
Business Address (Name, Street) (City) (State) (Zip) <b>BARI BUILDERS, 1975 NW 18TH ST, POMPANO BEACH, FL 33069</b>		Phone	Occupation <b>Superintendent</b>
D/L Number, State <b>008697455 / LA</b>	Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>METAIRIE, LA</b>
Citizenship <b>US</b>			

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor	<input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor	<input type="checkbox"/> 5. Juvenile

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian	Name (Last, First, Middle)	Residence Phone
Address (Street, Apt. Number) (City) (State) (Zip)	<b>VICTIM NOTIFICATION REQUIRED</b>	Business Phone
Notified by (Name)	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated
Released To (Name)	Relationship	Date
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.		Grade
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No	Property Crimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property
		Value of Property

Drug Activity N N/A P Possess	S Sell B Buy T Traffic	R Smuggle D Deliver E Use	K Dispense/ Distribute	M Manufacture/ Produce/ Cultivate	Z Other	Drug Type N N/A A Amphetamine	B Barbiturate C Cocaine E Heroin	H Hallucinogen M Marijuana O Opium/Deriv.	P Paraphernalia/ Equipment S Synthetic	U Unknown Z Other
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Charge Description <b>SIMPLE BATTERY/DOMESTIC</b>	Statute Violation Number <b>784.03 (1A)</b>	Violation of ORD #
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount / Unit
Offense # <b>2018-001329</b>	Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Warrant / Capias Number	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit
Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N
Warrant / Capias Number	Statute Violation Number	Violation of ORD #

Charge Description	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit
Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N
Warrant / Capias Number	Statute Violation Number	Violation of ORD #

Health / Apparent Physical Condition of Defendant	Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health	PROPERTY - Received By
Transported By	Date Transported
	Time Transported
	Other

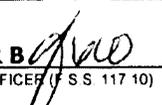
<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court	Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33446</b>
<input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.	Court Date and Time <b>To be set</b>
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.	
Signature of Defendant (or Juvenile and Parent/Custodian)	Date Signed

HOLD for Other Agency	Signature of Arresting Officer	Name Verification (Printed by Arrestee)
<input checked="" type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Name of Arrestee (Print) <b>MCGARRY, MATTHEW T.</b>	(PRINT)
<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	I.D. # <b>649</b>	
Intake Deputy <b>mad</b>	Transporting Officer <b>MCGarry 649</b>	I.D. # <b>649</b>
Pouch #	Witness here (Name, Signature, Title, #)	WITNESS

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time <b>01/28/2018 08:43</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3   2   2018-001329</b>	
	Agency ORI Number <b>FL 0500200</b>		Name (Last, First, Middle) <b>FREEMAN, JEFFREY PAUL</b>		Race <b>W</b>	Sex <b>M</b>
D E F	Charge Description (A1) <b>784.03 SIMPLE BATTERY/DOMESTIC</b>				Date of Birth <b>09/25/1986</b>	
	Victim's Name (Last, First, Middle) <b>WALKER, DELILAH</b>				Race <b>W</b>	Sex <b>F</b>
C H R G	Local Address (Street, Apt. Number) <b>765 JEFFERY ST, BOCA RATON, FL 33487</b>		(City)	(State)	(Zip)	Phone <b>(843) 591-5241</b>
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone
V I C T I M	DEFENDANT'S STATEMENTS: Written <input type="checkbox"/> Taped <input checked="" type="checkbox"/> Oral <input type="checkbox"/>		OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):			
	VICTIM'S STATEMENTS: Written <input type="checkbox"/> Taped <input checked="" type="checkbox"/> Oral <input type="checkbox"/>		<b>UPSET</b>			
A D D I T I O N A L	RELATIONSHIP BETWEEN VICTIM & SUSPECT <b>UPSET</b>					
	PHOTOGRAPHS: Scene: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Victim: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 911 CALL: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CALLER: <b>ANONYMOUS</b> WEAPON USED: <input type="checkbox"/> YES <input type="checkbox"/> NO TYPE: WITNESSES: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If YES, attach witness list) INJURIES: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO MEDICAL TREATMENT: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO AT: Scene: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO PARAMEDICS: <b>REFUSED</b> Hospital: <input type="checkbox"/> YES <input type="checkbox"/> NO PHYSICIAN(S) / HOSPITAL: ACT COMMITTED IN PRESENCE OF MINOR(S): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO NAMES/AGES: H. R. S. NOTIFIED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO VICTIM PREGNANT: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO VIOLATION OF RESTRAINING ORDER: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO CASE #: PRIOR HISTORY OF DOMESTIC VIOLENCE: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO ALCOHOL OR DRUGS INVOLVED: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
I N F O R M A T I O N	On 01/28/18 at 0600 hours I responded to 765 Jeffery St #304, in reference to a domestic dispute between boyfriend and girlfriend. Upon my arrival I made contact with the neighbors of the above address who requested to remain anonymous.					
	STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.  _____ SIGNATURE OF ARRESTING OFFICER Sworn to and subscribed to before me this <u>28</u> day of <u>January</u> , 2018.  _____ NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)					

CERTIFIED COPY

COURT

STATE ATTORNEY

CENTRAL RECORDS

**SCANNED**  
JAIL  
**JAN 29 2018**

CRIME ANALYSIS

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County  
Narrative Continuation

A D M I N	Date / Time <b>01/28/2018 08:43</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3   2   2018-001329</b>
	Agency ORI Number <b>FL 0500200</b>			

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According to the neighbors, they could hear a male and female yelling from the apartment #304 and it doesn't sound good. Upon my arrival at #304, I made contact with Jeffrey Freeman and Delilah Walker.

While entering the apartment, I witnessed numerous broken items all over the floor throughout the apartment.

Back up officer, Officer Vezina made contact with Delilah in the bedroom and I spoke with Jeffrey in the living room area.

Jeffrey, who was crying and upset told me he came home at 0600 hours and found numerous glass items broken all over the apartment. Jeffrey then walked into the his bedroom and saw Delilah laying on the bathroom floor crying with blood coming from the back of her head. Jeffrey then grabbed Delilah to see if she was ok, and the two then began to argue. Jeffrey advised the two pushed and shoved each other during the argument and that is when the BRPD arrived.

Jeffrey advised Delilah was upset that he was out with his friends and this is what caused her to become so upset. Jeffrey had no injuries to report.

I then spoke to Delilah and she advised me that she knows she did break all of the items in their residence, but she doesn't recall breaking all the items. I then asked Delilah how she had gotten a cut on the back of her head.

Delilah told me that she was upset because she was unable to get in touch with Jeffrey all night. When he came home this morning she was in the bathroom sitting on the toilet. Jeffrey came into the bathroom and was very upset because of all the items she had broken throughout the residence.

The two began to argue and while arguing, Jeffrey grabbed Delilah by the back of her head and pushed her down to the floor. Delilah advised that she fell to the floor and hit the back of her head against the edge of the walk in shower. Delilah thinks this is how the cut was caused on the back of her head, but she was not sure.

The BRPD responded to the scene for Delilah's injuries and she refused medical attention.

I had Officer Vezina take a statement from Delilah who then again gave the above statement. Delilah confirmed with Officer Vezina that she was grabbed by the back of her head by Jeffrey and thrown to the floor. Photos were taken of Delilah and the apartment. All were marked as evidence.

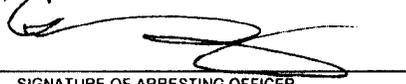
I again spoke to Jeffrey and he denied ever pushing Delilah to the floor. Jeffrey told me that she is making this up and he had found her with a cut on her head.

Due to the statement given by Delilah and the injuries she sustained during this dispute, Jeffrey Freeman was taken into custody without incident per FSS 784.03 Simple Battery/Domestic Violence.

Jeffrey was transported to the BRPD Booking Facility and then later transported to the Palm Beach County Jail.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Appeared before me, \_\_\_\_\_ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

  
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 28 day of January, 2018.

AUGELLO, PETER B  
NOTARY PUBLIC / CLERK OF COURT / OFFICER (S 117 10)

SCANNED  
JAN 29 2018